

15-02

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01/09/02



UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No.:	SC11448TP P01
	First Inventor:	Rana P. Singh et al.
	Title:	SEMICONDUCTOR DEVICE STRUCTURE AND METHOD FOR FORMING
	Express Mail Label No.:	EL581727996US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents)	ADDRESS TO: BOX: New Patent Application Commissioner for Patents Washington D.C. 20231
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<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification Total Pages <input type="text" value="23"/> (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&amp;D -Reference to sequence listing, a table, -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets <input type="text" value="4"/></p> <p>5. Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/ divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CFR) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies); ii. <input type="checkbox"/> or paper c. <input type="checkbox"/> Statements verifying identify of above copies</p> <p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) <input type="checkbox"/> Power of Attorney Statement (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input checked="" type="checkbox"/> IDS <input type="text" value="1"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input checked="" type="checkbox"/> Other: <input checked="" type="checkbox"/> Reference/AA <input checked="" type="checkbox"/> Copy of Related Application</p>
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18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input checked="" type="checkbox"/> Continuation-in- Part (CIP)	Prior Appl. No. <input type="text" value="09/997,145"/>
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Prior Appl. information:  Examiner:  Group/Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<input type="text" value="23125"/>	or	<input type="checkbox"/> Correspondence address below
Name			
Address			
City	State	Zip Code	
Country	U.S.A.	Telephone	512.996.6839 Fax 512.996.6854
Name	Joanna G. Chiu		Registration No. 43,629
SIGNATURE			Date 1/8/02

# FEE TRANSMITTAL

Patent fees are subject to annual revision

Complete if Known

Application Number

Filing Date

First Named Inventor

Rana P. Singh

Examiner Name

Group Art Unit

TOTAL AMOUNT OF PAYMENT

(\$1596.00)

Attorney Docket No.

SC11448TP P01

## METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

Deposit Account Number

13-4773

Deposit Account Name

Motorola, Inc.

☒ Charge Any Additional Fee required under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check

☐ Credit Card

☐ Money Order

☐ Other

## FEE CALCULATION

### BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Paid
101	740	201	370	Utility filing fee
106	330	206	165	Design filing fee
107	510	207	255	Plant filing fee
108	740	208	370	Reissue filing fee
114	160	214	80	Provisional filing fee

SUBTOTAL (1) (\$740)

### EXTRA CLAIM FEES

Total Claims	Previously Paid**	Extra Claims	Fee from below	Fee Paid
42	20	22	18	396
Independent Claims	8	3	5	84

Multiple Dependent

280 = 0

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	* Reissue independent claims over original patent
110	18	210	9	* Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$816)

\*\*OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.

\*For Reissues, see above

## SUBMITTED BY

Name (Print/Type)

Joanna G. Chiu

Signature

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Telephone

512.996.6839

Date

1/8/02

\* Reduced by Basic Filing Fee paid

SUBTOTAL (3)

(\$40)

Complete (if applicable)

SC11448TP P01